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Effective on 12/08/2004  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2006

Applicant claims small entity status See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 120.00)

## Complete if Known

|                      |                        |
|----------------------|------------------------|
| Application Number   | 10/647,384-Conf. #2049 |
| Filing Date          | August 26, 2003        |
| First Named Inventor | Roger J. M. PEETERS    |
| Examiner Name        | T. A. Morrison         |
| Art Unit             | 3653                   |
| Attorney Docket No.  | 0142-0422P             |

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of  Credit any overpayments  
fee(s) under 37 CFR 1.16 and 1.17

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| <u>Application Type</u> | <u>FILING FEES</u> |                              | <u>SEARCH FEES</u> |                              | <u>EXAMINATION FEES</u> |                              | <u>Fees Paid (\$)</u> |
|-------------------------|--------------------|------------------------------|--------------------|------------------------------|-------------------------|------------------------------|-----------------------|
|                         | <u>Fee (\$)</u>    | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u>    | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u>         | <u>Small Entity Fee (\$)</u> |                       |
| Utility                 | 300                | 150                          | 500                | 250                          | 200                     | 100                          |                       |
| Design                  | 200                | 100                          | 100                | 50                           | 130                     | 65                           |                       |
| Plant                   | 200                | 100                          | 300                | 150                          | 160                     | 80                           |                       |
| Reissue                 | 300                | 150                          | 500                | 250                          | 600                     | 300                          |                       |
| Provisional             | 200                | 100                          | 0                  | 0                            | 0                       | 0                            |                       |

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 (including Reissues)

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
|---------------------|---------------------|-----------------|----------------------|----------------------------------|-----------------|-----------------|
|---------------------|---------------------|-----------------|----------------------|----------------------------------|-----------------|-----------------|

Each independent claim over 3 (including Reissues)

| <u>Fee (\$)</u> | <u>Fee (\$)</u> |
|-----------------|-----------------|
|-----------------|-----------------|

Multiple dependent claims

| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|----------------------|---------------------|-----------------|----------------------|
|----------------------|---------------------|-----------------|----------------------|

HP = highest number of independent claims paid for. if greater than 3

| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|-----------------|----------------------|
|---------------------|---------------------|---|-----------------|----------------------|

1 - 100 = /50 (round up to a whole number) x = Fees Paid (\$)

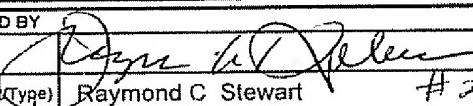
| <u>Name (Print/Type)</u> | <u>Signature</u> | <u>Registration No (Attorney/Agent)</u> | <u>Telephone</u> |
|--------------------------|------------------|---|------------------|
|--------------------------|------------------|---|------------------|

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month

120.00

|                   |   |                                  |        |           |                   |
|-------------------|---|----------------------------------|--------|-----------|-------------------|
| SUBMITTED BY      |  | Registration No (Attorney/Agent) | 21,066 | Telephone | (703) 205-8012    |
| Name (Print/Type) | Raymond C. Stewart  | # 22463                          |        | Date      | December 28, 2006 |